RECEIVING REPORT

IMPORTANT:

- * This form must be received in the payment office within 5 workdays of acceptance.
- * Acceptance must take place within 7 calendar days of delivery or completion of work unless a different inspection/ acceptance period is stated in the contract. Explain in block 8 if acceptance is longer than stated in the contract.
- * Invoices received must be time stamped to indicate the date of receipt.

	SECTION 1 - (CONTRACT IDENTIFICATION		
1. NAME OF CONTRACTOR	SECTION 1-V	SONTIAGE IDENTIFICATION		
2. PEGASYS DOCUMENT NUMBER	3. CONTRACT/	PURCHASE ORDER NO.		
	SECTION 2 - DESCRIP	PTION OF GOODS AND/OR SERVIC		
4A. ITEM NO.	4B. DESCRIPTION (Fe	or services, also give dates of servi	ice) 4C. QUANTITY	
5. MAXIMUM PAYMENT AMOUNT		8. REMARKS		
6. LESS DEDUCTION(S) FOR NONPERFORMANCE, ETC (Explain in Item 8)				
7. MAXIMUM AMOUNT APPROVED FOR PAYMEN (Item 5 less Item 6)	т			
		N 3 - CERTIFICATION(S)		
9. TYPE OF DELIVERY (Mark "X" in appro	opriate box) B. PARTIAL	C. FINAL PARTIAL		
10. CERT	ΓΙFICATION			
I CERTIFY THAT THE ABOVE GOODS AND/OR SERVICES HAVE BEEN RECEIVED ON (Date) AND ACCEPTED ON (Date)			11. SECOND CERTIFICATION (Optional) THIS IS TO CERTIFY THAT THE GOODS AND/OR SERVICES DESCRIBED HAVE BEEN ACCEPTED.	
A. NAME AND TITLE (Type, print or stam	p)	A. NAME AND TITLE (Type, print or	stamp)	
B. CORRESPONDENCE SYMBOL	C. TELEPHONE NUMBER	B. CORRESPONDENCE SYMBOL	C. TELEPHONE NUMBER	
E. SIGNATURE	F. DATE SIGNE	E. SIGNATURE	F. DATE SIGNED	